



Attorney Docket No. 1009683-000383

Patent

IPW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Naoko Hiramatsu et al.

Group Art Unit: 2621

Application No.: 09/918,530

Examiner: Ishrat I. Sherali

Filing Date: August 1, 2001

Confirmation No.: 3487

Title: COLOR MATCHING METHOD AND DEVICE, COLOR MATCHING PROGRAM, AND COMPUTER READABLE RECORD MEDIUM THAT STORES COLOR MATCHING PROGRAM ALLOWING APPROPRIATE COLOR MATCHING AT HIGH SPEED

REQUEST FOR CONTINUED EXAMINATION
TRANSMITTAL LETTER

MAIL STOP RCE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Customer Number **2 1 8 3 9**

Sir:

Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the

☐ \$395.00 (2801) ☒ \$790.00 (1801) fee due under 37 C.F.R. § 1.17(e).

1. ☐ A. Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified in item 2 below.

☐ B. Applicant(s) previously submitted the following documents for which continued examination is requested:

☐ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____

☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____

☐ Other: _____

2. The following documents are enclosed with this submission:

☒ Amendment/Reply.

☐ Affidavit(s)/Declaration(s).

☐ Information Disclosure Statement (IDS).

☐ A Petition for Extension of Time.

☐ Other: _____

03/22/2006 JADD01 00000066 09918530

01 FC:1001 790.00 0P

Buchanan Ingersoll PC
ATTORNEYS

Including attorneys from Burns Doane Swecker & Mathis

Page 1 of 2
(8/05)

3. ☐ Small entity status is hereby claimed.
☒ No additional claim fee is required.
☒ The fee is calculated below on the basis of the highest number of claims already paid for in this application prior to this submission:

CLAIMS					
	No. of Claims		Extra Claims	Rate	Fee
Examination Fee (1801)					\$ 790.00
Total Claims	14	MINUS 20 =	0	x \$50.00 (1202) =	\$ 0.00
Independent Claims	3	MINUS 3 =	0	x \$200.00 (1201) =	\$ 0.00
If multiple dependent claims are presented, add \$360.00 (1203)					
Total Fee					\$ 790.00
<input type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Application Fee					\$ 0.00
TOTAL FEE DUE					\$ 790.00

4. ☐ A check in the amount of _____ is enclosed for the fee due.
5. ☐ Charge _____ to Deposit Account No. 02-4800 for the fee due.
6. ☒ Charge 790.00 to credit card. Form PTO-2038 is attached.
7. ☐ Applicant(s) requests suspension of action by the Office until at least _____, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

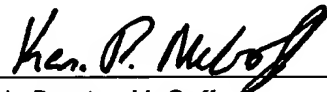
The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BUCHANAN INGERSOLL PC

P.O. Box 1404
Alexandria, Virginia 22313-1404
(703) 836-6620

By


Kevin Brayton McGoff

Registration No. 53,297

Filed: March 21, 2006